

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	D.B.	20200	8-20-99
O.I.P.E. CLASSIFIER		5	1-17-01
FORMALITY REVIEW		61001	9/3

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	2-19-02
2	5-2-03
3	5-2-03
4	5-2-03
5	5-2-03
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50	5-2-03

Claim	Date
Final	
Original	
51	6-21-02
52	6-21-02
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97	6-21-02
98	6-21-02
99	6-21-02
100	6-21-02

Claim	Date
Final	
Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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